

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

PLAINTIFF <i>Emmitt Grier, Jr.</i>	COURT CASE NUMBER <i>CA-05-0005 Erie</i>
DEFENDANT	TYPE OF PROCESS
<b>SERVE</b> { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>AT</b> <i>Commonwealth of Pa.</i> <b>ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)</b> <i>Home Office Suite 900</i> <i>The Widener Building, One South Penn Square, Philadelphia, PA 19107</i> SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
<input type="checkbox"/> Number of process to be served with this Form 285	
<input type="checkbox"/> Number of parties to be served in this case	
<input type="checkbox"/> Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fwd	1
2	3
3	4
4	5

Signature of Attorney other Originator requesting service on behalf of:	<input type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT		

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. <i>68</i>	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
---	---------------	-------------------------------------	--------------------------------	--	------

I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) <i>LOUIS P. PAOLONE, JR.</i>	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
--	--

Address (complete only different than shown above)	Date <i>4 JAN 06</i>	Time <i>11:00</i> <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <i>Burke, CENUS</i>	

Service Fee <i>\$45.00</i>	Total Mileage Charges including endearments <i></i>	Forwarding Fee <i>\$0.00</i>	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of refund*) <i>\$53.00</i>
-------------------------------	--	---------------------------------	---------------	------------------	---

REMARKS: To Phil Delphit  
Endearment 11/14/05 - Address is for Commonwealth Court not Commonwealth of PA

- PRINT 5 COPIES:**
1. CLERK OF THE COURT
  2. USMS RECORD
  3. NOTICE OF SERVICE
  4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
  5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED